

DCPS Afterschool Program Intent to Enroll Form

Student Information

1. Student's Full Legal Name (Last, First, Middle)			2. Date of Birth (Month, Day, Year)		3. Student ID Number	
4. Address		Apt. No.	5. Telephone Number (Home/ Student's Cell) () ()		6. Home Language	
7. City	State	Zip	8. Grade	Teacher	9. IEP requiring afterschool services Yes No I don't know	

Pick-Up Information

Please check all options that apply:

My child may be picked up by any of the following people:		
Name	Relationship	Phone Number(s)
Name	Relationship	Phone Number(s)
Name	Relationship	Phone Number(s)
My child may walk home alone at _____ (time) unless otherwise specified.		

Contact Information

Parent/Guardian Name	Cell Phone	Work Phone
	Home Phone	Email
Emergency Contact Name	Cell Phone	Work Phone
	Home Phone	Email

Release Information

I agree to the following terms:

Initials	Statements
	I hereby give permission for my child to participate in afterschool activities sponsored by DCPS.
	I agree to pay the required co-payment for afterschool programming if I do not qualify for free programming.
	I allow DCPS to use photos of my child and copies of my child's work for program advertisement, without use of my child's name.

Parent/Guardian Signature: _____ Date: _____

Names of All Children in the Family Who Participate in DCPS Afterschool Program

1.	2.
3.	4.
5.	6.

Names of Other Children in the Immediate Family Who Are Not in the DCPS Afterschool Program

1.	2.
3.	4.
5.	6.

Parent/Guardian Information

DCPS must collect this information for federal reporting purposes.

Statements	
My child lives with one parent/guardian : _____ (name) _____ (relationship)	
My child lives with two parents: _____ (name) _____ (name)	

____ Check here if your child is a DCPS student and you provided residency verification in order to enroll your child in school.

By signing below, I acknowledge that I intend to enroll my child in his/her school's afterschool program and that this form only enrolls my child in the afterschool program for the *weeks of August 23rd – September 3rd*. I understand that in order to fully enroll my child in the afterschool program at his/her school, between August 23rd and September 3rd I must bring the documents listed on the *Documents Required to Enroll in the DCPS Afterschool Program* form to my child's school and, if necessary, must pay the co-payment for September.

Parent/Guardian Name: _____ Date: _____